WHAT IS CLAIMED IS:

1. A method for forming a working space at an anastomotic site in a body lumen having a wall with an outer surface and an inner surface, and an interior lumen, said method comprising:

introducing an inflatable barrier through an access penetration in the wall into the interior lumen of the body lumen;

positioning a recessible surface of the inflatable barrier against an anastomotic site on the inner surface of the body lumen wall, wherein the anastomotic site is spaced-apart from the access penetration; and

inflating the barrier such that the recessible surface isolates a working space within the lumen.

2. A method as in claim 1, wherein the barrier is introduced in a deflated condition through the access penetration and thereafter inflated to create the working space.

3. A method as in claim 2, wherein the inflatable barrier has an inflated geometry which defines the working space.

4. A method as in claim 3, wherein the working space defined by the inflated geometry is concave or an annular groove.

5. A method as in claim 1, further comprising engaging a rigid tool against the recessible surface of the inflated barrier to create the working space.

6. A method as in claim 1, wherein introducing comprises introducing a catheter having the barrier at a distal end thereof through a needle.

7. A method as in claim 1, further comprising cutting a hole through the wall to prepare the anastomotic site.

8. A method as in claim 7, wherein the hole is cut before the barrier is inflated.

9. A method as in claim 7, wherein the hole is cut after the barrier is inflated.

10. A method as in claim 7, further comprising attaching a graft vessel to the anastomotic site.

11. A method as in claim 7, wherein cutting the hole comprises use of a cutting die.

12. A method as in claim 1, further comprising deflating the barrier .and withdrawing the deflated barrier through the access penetration.

13. A method as in claim 1, wherein introducing comprises advancing the barrier with a shaft passing through the access penetration, wherein an end of the shaft attached to the barrier is curved to facilitate locating the recessible surface of the barrier back against the inner wall of the body lumen.

14. A method as in claim 1, wherein positioning the recessible surface of the inflatable barrier comprises pulling on a tether to hold the recessible surface of the barrier against the inner surface of the body lumen wall.

15. A method as in claim 14, further comprising advancing a cutting die over or adjacent to the tether, wherein the cutting die includes a hole or channel to align the die with the tether as the die is advanced.

16. A method as in claim 15, further comprising attaching an end of a graft vessel to the anastomotic site, wherein the tether is disposed between the graft vessel and the hole in the blood vessel wall.

17. A method as in claim 14, wherein the tether is at least partly elastic so that it elastically elongates as tension is applied.

18. A method as in claim 1, further comprising protecting the recessible surface of the inflatable barrier against accidental needle penetration during suturing.

19. A method as in claim 18, wherein protecting comprises locating a needle penetration guard over at least a portion of the concave surface of the inflatable barrier.

20. A method as in claim 19, wherein locating the needle guard deforms the inflatable barrier and creates or enlarges the working space.

21. A method as in claim 1, wherein introducing and positioning comprise (a) advancing a curved needle into the body lumen through the access penetration and out of the body lumen through the anastomotic site, and (b) pulling on a tether attached to the inflatable barrier to draw the recessible surface of said barrier against the inner surface of the body lumen.

22. A method as in claim 21, further comprising introducing a needle penetration guard through the anastomotic site over the recessible surface.

23. A method as in claim 22, wherein the needle penetration guard has a shaft which extends through a catheter attached to the inflatable barrier , wherein both the shaft and catheter extend back through the penetration hole.

24. A method as in claim 23, further comprising withdrawing the inflatable barrier and the needle penetration guard through the access penetration.

25. A method as in claim 24, wherein the needle penetration guard is removed first by withdrawing through a catheter lumen.

26. A method as in claim 25, wherein the needle penetration guard unravels as it is withdrawn through the catheter.

27. Apparatus for isolating a working space in a blood vessel having a wall with an outer surface, an inner surface, and an interior lumen, said apparatus comprising:

an inflatable barrier having a recessible surface which is adapted to conform to and seal against the inner surface of the blood vessel wall to define the working space at an anastomotic site; and

means for introducing and deploying the inflatable barrier through a penetration in the blood vessel wall, wherein the penetration is spaced-apart from the anastomotic site.

28. Apparatus as in claim 27, wherein the introducing means comprises a catheter having a proximal end, a distal end, and an inflation lumen therethrough, wherein the inflatable barrier is attached at or near the distal end of the catheter.

29. Apparatus as in claim 28, wherein at least a distal portion of the catheter is curved and the barrier is oriented so that it can be pushed by the catheter against a location axially spaced-apart from the penetration through which the barrier and catheter were introduced.

30. An apparatus as in claim 29, wherein the curved distal portion induces a first radially divergent curve and a second radially convergent curve.

31. Apparatus as in claim 30, wherein the introducing means further comprises a tether extending distally from the barrier, wherein said tether is adapted to be passed through the anastomotic site wall to permit tensioning of the barrier by drawing outwardly on the tether.

32. Apparatus as in claim 30, further comprising a curved needle attached to a distal end of the tether, wherein the curve of the needle is "similar or congruent" with the first curve of the catheter.

33. Apparatus as in claim 32, wherein at least one of the needle and the catheter is at least partly malleable so that it can be shaped prior to use.

34. Apparatus as in claim 26, wherein the inflatable barrier comprises an elastomeric balloon.

35. Apparatus as in claim 35, wherein the balloon has a torroidal geometry.

36. Apparatus as in claim 34, wherein the recessible surface comprises an annular groove to define the working space.

37. Apparatus as in claim 34, wherein the recessible balloon surface comprises a flat or convex surface which can be engaged by a rigid tool to define the working space.

38. Apparatus as in claim 35, further comprising a needle penetration shield.

39. Apparatus as in claim 38, wherein the needle penetration shield comprises a layer of a puncture-resistant material laminated to the balloon surface.

40. Apparatus as in claim 38, wherein the needle penetration shield is a separate tool that can be introduced through the anastomotic site.

41. Apparatus for isolating a working space in a body lumen having a wall, an inner surface, and an interior lumen, said apparatus comprising:

an inflatable barrier structure having a recessible surface which is adapted to conform to and seal against the inner surface of the body lumen wall to define the working space; and

a needle penetration guard engageable against the recessible surface of the inflatable barrier when the barrier is inflated.

42. Apparatus as in claim 41, wherein the inflatable barrier structure comprises a catheter having a proximal end, a distal end, and an inflation lumen therethrough; wherein the inflatable barrier is attached at or near the distal end of the catheter.

43. Apparatus as in claim 42, wherein the catheter has at least an inflation lumen and a shaft-receiving lumen extending therethrough.

44. Apparatus as in claim 43, wherein the needle penetration guard comprises a shield surface and a shaft attached to the shield surface, wherein the shaft is adapted to pass into and through the shaft-receiving lumen of the inflatable barrier catheter when the shield is in place over the recessible surface.

45. Apparatus as in claim 44, wherein the needle penetration guard further comprises a removable placement tool which detachably couples to the shield surface on a side opposite to the shaft.

46. Apparatus as in claim 42, wherein the at least a distal portion of the catheter is curved and the barrier is oriented so that it can be pushed by the catheter

against a location axially spaced-apart from the penetration through which the barrier and shaft were introduced.

47. Apparatus as in claim 46, wherein the curved distal portion induces a first radially divergent curve and a second radially convergent curve.

48. Apparatus as in claim 47, further comprising a tether extending distally of the inflatable barrier to permit tensioning of the barrier by drawing outwardly on the tether.

49. Apparatus as in claim 48, further comprising a curved needle attached to the tether.

50. Apparatus as in claim 49, wherein the curve of the needle is "similar or congruent" with the curve of the distal end of the catheter.

51. Apparatus as in claim 49, wherein the needle and the catheter are malleable so that the curves can be changed.

52. A method as in claim 15, further comprising attaching an end of a graft vessel to the anastomotic site, wherein the tether is disposed through the hole in the blood vessel and outside of a lumen of the graft vessel.

53. A method as in claim 24, wherein the needle penetration guard is removed by withdrawing through the anastomotic site.

54. A method as in claim 44, wherein the needle penetration guard is adapted to uncoil when withdrawn from the vessel.